Please type a plus sign (+) inside this box  Under the Paperwork Reduction Act of 1995, no persons are required to respo	PTO/SB/05 (11-00) Approved for use through 10/31/2002. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE and to a collection of information unless it displays a valid OMB control number.		
UTILITY	Attorney Docket No. MRI-T109D1		
PATENT APPLICATION	First Inventor Wolfgang Daum		
TRANSMITTAL	Title Navigation of a Medical Instrument		
(Only for new nonprovisional applications under 37 CFR 1.53(b))	Express Mail Label No. EU 082848440 US		
APPLICATION ELEMENTS  See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231		
1. Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)  2. Applicant claims small entity status. See 37 CFR 1.27.  3. Specification [Total Pages 11]  3. Specification [Total Pages 11]  4. Specification [Total Pages 1]  5. Cathement Regarding Fed sponsored R & D  6. Reference to sequence listing, a table, or a computer program listing appendix  7. Background of the Invention  7. Brief Summary of the Invention  8. Brief Description of the Drawings (if filed)  9. Detailed Description  1. Claim(s)  1. Abstract of the Disclosure  4. Drawing(s) (35 U.S.C. 113) [Total Sheets 11]  5. Oath or Declaration [Total Pages 2]  1. Newly executed (original or copy)  Copy from a prior application (37 CFR 1.63 (d))  6. Methyle executed (original or copy)  Copy from a prior application with Box 18 completed)  1. DELETION OF INVENTOR(S)  Signed statement attached deleting inventor(s)  1. named in the prior application, see 37 CFR  1.63(d)(2) and 1.33(b).  6. Application Data Sheet. See 37 CFR 1.76  18. If a CONTINUING APPLICATION, check appropriate box, and support in an Application Data Sheet under 37 CFR 1.76:  Continuation Divisional Continuation-in-part (CIP)  Prior application information: Examiner Ralph A. Lewis  For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the Box 5b, is considered a part of the disclosure of the accompanying contint The incorporation can only be relied upon when a portion has been inadvention.	7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)  8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)  a. Computer Readable Form (CRF)  b. Specification Sequence Listing on:  i. CD-ROM or CD-R (2 copies); or  ii. paper  c. Statements verifying identity of above copies  ACCOMPANYING APPLICATION PARTS  9. Assignment Papers (cover sheet & document(s))  10. 37 CFR 3.73(b) Statement Power of (when there is an assignee)  11. English Translation Document (if applicable)  12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449  13. Preliminary Amendment  14. American Postcard (MPEP 503) (Should be specifically itemized)  15. (Certified Copy of Priority Document(s) (if foreign priority is claimed)  16. Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.  17. Other: Certificate of Mailing by Express Mail  of prior application No. 09 / 954,725  Group Art Unit: 3732  Group Art Unit: 3732  Ene prior application, from which an oath or declaration is supplied under relation or divisional application and is hereby incorporated by reference.		
Customer Number or Bar Code Label 23,557	or Correspondence address below		
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Address

City State Zip Code Country

Telephone Fax

Name (Print/Type) James S. Parker Registration No. (Attorney/Agent) 40,119

Signature Date 08/01/03

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## FEE TRANSMITTAL FORM

Assistant Commissioner for Patents
Box Patent Application
Washington, D.C. 20231

Sir:

Transmitted herewith for filing is the patent application of:

Inventor(s): Wolfgang Daum and Axel Winkel

Entitled: Navigation of a Medical Instrument

- A Utility Patent Application Transmittal Form accompanies this Fee Transmittal Form.
- The filing fee is calculated below:

	37 1	C1 1		ъ.	-
	Numb	er filed	Number Extr	a Rate	Fee
Basic Fee					\$
Total Claims	12	- 20 =	0	x \$09	
Independent Claims	1	3 =	0	x \$42	
Presentation of Multiple Depe	ndent Claim(s)	(\$165)			
	_			Total Filing Fee	\$ .00

This application is being mailed by Express Mail under 37 CFR 1.10 and the required certificate appears below.

Date

James F. Parker (Attorney of Record)

CERTIFICATE OF MAILING BY EXPRESS MAIL (37 CFR 1.10)

ZU 044848580 U3	
Express Mail No.	Date of Deposit: <u>August 1, 2003</u>
I hereby certify that this paper is being deposited v	with the United States Postal Service "Express Mail Post Office to
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